

KPDES FORM 1

AZ# 10

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION

This is an application to: (check one)

- ☐ Apply for a new permit.
☒ Apply for reissuance of expiring permit.
☐ Apply for a construction permit.
☐ Modify an existing permit.

Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:

Form A, Form B, Form C, Form F, or Form SC

For additional information contact:
 KPDES Branch (502) 564-3410

OK 200-

I. FACILITY LOCATION AND CONTACT INFORMATION		AGENCY USE		0071765	
A. Name of business, municipality, company, etc. requesting permit <i>Newcomb Oil Co.</i>					
B. Facility Name and Location			C. Primary Mailing Address (all facility correspondence will be sent to this address). Include owner mailing address on a separate sheet if different.		
Facility Location Name: <i>Newcomb Oil - Columbia Plant</i>			Facility Contact Name and Title: Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> <i>Devin Greenwell - Safety/Env. Coordinator</i>		
Facility Location Address (i.e. street, road, etc., not PO Box): <i>706 Burhesville Street</i>			Mailing Address: <i>1360 E. John Rowan Blvd.</i>		
Facility Location City, State, Zip Code: <i>Columbia, KY 42728</i>			Mailing City, State, Zip Code: <i>Bardstown, KY 40004</i>		
			Facility Contact Telephone Number: <i>(502) 348-3961</i>		

II. FACILITY DESCRIPTION			
A. Provide a brief description of activities, products, etc.: <i>Storage + distribution of gasoline and other petroleum distillates.</i>			
B. Standard Industrial Classification (SIC) Code and Description:			
Principal SIC Code & Description:	<i>5171 Petroleum Bulk Stations and Terminals</i>		
Other SIC Codes:			

III. FACILITY LOCATION	
A. Attach a U.S. Geological Survey 7 1/2 minute quadrangle map for the site. (See instructions)	
B. County where facility is located: <i>ADAIR</i>	City where facility is located (if applicable): <i>COLUMBIA</i>
C. Body of water receiving discharge: <i>Petty's Fork / Russell Creek / Green River / Ohio River</i>	
D. Facility Site Latitude (degrees, minutes, seconds): <i>37° 05' 55"</i>	Facility Site Longitude (degrees, minutes, seconds): <i>85° 18' 52"</i>
E. Method used to obtain latitude & longitude (see instructions): <i>Topo Map Coordinates</i>	
F. Facility Dun and Bradstreet Number (DUNS #) (if applicable): <i>05-000-6196</i>	

IV. OWNER/OPERATOR INFORMATION	
A. Type of Ownership: <input type="checkbox"/> Publicly Owned <input checked="" type="checkbox"/> Privately Owned <input type="checkbox"/> State Owned <input type="checkbox"/> Both Public and Private Owned <input type="checkbox"/> Federally owned	
B. Operator Contact Information (See instructions)	
Name of Treatment Plant Operator:	Telephone Number:
Operator Mailing Address (Street):	
Operator Mailing Address (City, State, Zip Code):	
Is the operator also the owner? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is the operator certified? If yes, list certification class and number below. Yes <input type="checkbox"/> No <input type="checkbox"/>
Certification Class:	Certification Number:

V. EXISTING ENVIRONMENTAL PERMITS		
Current NPDES Number: <i>KY0071765</i>	Issue Date of Current Permit: <i>August 12, 2005</i>	Expiration Date of Current Permit: <i>June 30, 2009</i>
Number of Times Permit Reissued: <i>UNKNOWN</i>	Date of Original Permit Issuance: <i>UNKNOWN</i>	Sludge Disposal Permit Number:
Kentucky DOW Operational Permit #:	Kentucky DSMRE Permit Number(s):	

Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source	<i>NA</i>	<i>No</i>
Solid or Special Waste	<i>NA</i>	<i>No</i>
Hazardous Waste - Registration or Permit	<i>NA</i>	<i>No</i>

VI. DISCHARGE MONITORING REPORTS (DMRs)

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). Information in this section serves to specifically identify the name and telephone number of the DMR official and the DMR mailing address (if different from the primary mailing address in Section I.C).

A. DMR Official (i.e., the department, office or individual designated as responsible for submitting DMR forms to the Division of Water):	<i>Devin Greenwell</i>
DMR Official Telephone Number:	<i>(502) 348-3961</i>

B. DMR Mailing Address:	
<ul style="list-style-type: none"> Address the Division of Water will use to mail DMR forms (if different from mailing address in Section I.C), or Contact address if another individual, company, laboratory, etc. completes DMRs for you; e.g., contract laboratory address. 	
DMR Mailing Name:	
DMR Mailing Address:	
DMR Mailing City, State, Zip Code:	

VII. APPLICATION FILING FEE

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount (for permit renewals, please include the KPDES permit number on the check to ensure proper crediting). Descriptions of the base fee amounts are given in the "General Instructions."

Facility Fee Category: <i>Non-Process Industry</i>	Filing Fee Enclosed: <i>\$200</i>
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VIII. CERTIFICATION

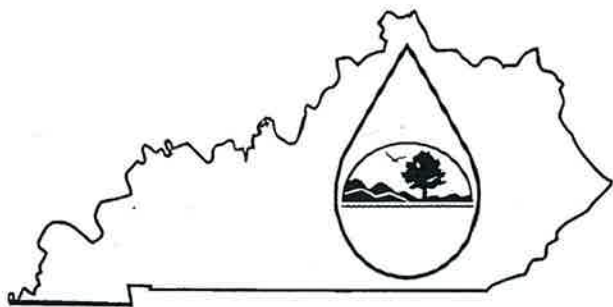
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print): Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> <i>J L Newcomb Jr</i>	TELEPHONE NUMBER (area code and number): <i>502-348-3961</i>
SIGNATURE <i>J L Newcomb Jr</i>	DATE: <i>12/12/08</i>

KPDES FORM F

AI 10

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM



PERMIT APPLICATION

A complete application consists of this form and Form 1.
For additional information, Contact KPDES Branch, (502) 564-3410.

I. OUTFALL LOCATION	AGENCY USE	0	0	7	1	7	6	5
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For each outfall list the latitude and longitude of its location to the nearest 15 seconds and name the receiving water.

A. Outfall Number	B. Latitude			C. Longitude			D. Receiving Water (name)
1	37°	05'	55"	85°	18'	52"	Open Ditch to Patty's Fork to Russell creek to Green River to Ohio River

II. IMPROVEMENTS

A. Are you now required by any federal, state, or local authority to meet any implementaiton schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

1. Identification of Conditions, Agreements, Etc.	2. Affected Outfalls		3. Brief Description of Project	4. Final Compliance Date	
	No.	Source of Discharge		a. req.	b. proj.

B. You may attach additional sheets describing any additional water pollution (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

III. SITE DRAINAGE MAP

Attach a site map showing topography (or indicating the outline of drainage areas served by the outfall(s) covered in the application if a topographic map is unavailable) depicting the facility including: each of its intake and discharge structures; the drainage area of each storm water outfall; paved areas and buildings within the drainage area of each storm water outfall, each know past or present areas used for outdoor storage or disposal of significant materials, each existing structural control measure to reduce pollutants in storm water runoff, materials loading and access areas, areas where pesticides, herbicides, soil conditioners and fertilizers are applied; each of its hazardous waste treatment, storage or disposal units (including each area not required to have a RCRA permit which is used for accumulating hazardous waste under 40 CFR 262.34); each well where fluids from the facility are injected underground; springs, and other surface water bodies which receive storm water discharges from the facility.

IV. NARRATIVE DESCRIPTION OF POLLUTANT SOURCES

A. For each outfall, provide an estimate of the area (include units) of impervious surfaces (including paved areas and building roofs) drained to the outfall, and an estimate of the total surface area drained by the outfall.

Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)	Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)
1	15000 sq. ft.	60000 sq. ft.			

B. Provide a narrative description of significant materials that are currently or in the past three years have been treated, stored or disposed in a manner to allow exposure to storm water; method of treatment, storage, or disposal; past and present materials management practices employed to minimize contact by these materials with storm water runoff; materials loading and access areas; and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

Gasoline and petroleum distillates are stored and transferred on this facility's premises. Spill containment measures, such as concrete basins and diked areas, are in place to minimize stormwater contact.

C. For each outfall, provide the location and a description of existing structural and nonstructural control measures to reduce pollutants in storm water runoff; and a description of the treatment the storm water receives, including the schedule and type of maintenance for control and treatment measures and the ultimate disposal of any solid or fluid wastes other than by discharge.

Outfall Number	Treatment	List Codes from Table F-1
1	Concrete containment basin and diked area with valve controlled discharge.	4A/4C

V. NON-STORM WATER DISCHARGES

A. I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of non-storm water discharges, and that all non-storm water discharges from these outfall(s) are identified in either an accompanying Form C or Form SC application for the outfall.

Name and Official Title (type or print)	Signature	Date Signed
JL Newcomb Jr	JL Newcomb Jr	12/12/08

B. Provide a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test.

Stormwater samples are collected from the outfall area (when available - depending on rainfall) upon release of stormwater from the valve-controlled dike area around the aboveground tanks. The samples are analyzed for pH, oil & Grease, Total Suspended Solids, Toluene and Benzene.

VI. SIGNIFICANT LEAKS OR SPILLS

Provide existing information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released.

On 3-9-06 a leaking pipe was discovered. An estimated 20 gallons of unleaded gasoline was released into the ground.

VII. DISCHARGE INFORMATION

A,B,C, & D: See instructions before proceeding. Complete one set of tables for each outfall. Annotate the outfall number in the space provided. Tables F-1, F-2, and F-3 are included on separate pages.

E: Potential discharges not covered by analysis - is any toxic pollutant listed in Table F-2, F-3, or F-4, a substance which you currently use or manufacture as an intermediate or final product or by product.

☒ Yes (list all such pollutants below) ☐ No (go to Section IX)

BTEX (Gasoline /Kerosene) and PAH (Diesel fuel)

Gasoline, Diesel Fuel and Kerosene are stored and transferred on this facility's premises.

VIII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ Yes (list all such results below) ☒ No (go to Section IX)

IX. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in item VII performed by a contract laboratory or consulting firm?

☒ Yes (list the name, address and telephone number of, and pollutants analyzed by each such laboratory or firm below; use additional sheets if necessary).

☐ No (go to Section IX)

A. Name	B. Address	C. Area Code & Phone No.	D. Pollutants Analyzed
McCoy + McCoy Labs, Inc.	P.O. Box 907 Madisonville, KY 42431	(270) 821-7375	TSS, oil/Grease, Toluene, Benzene

X. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations.

NAME & OFFICIAL TITLE (type or print)	AREA CODE AND PHONE NO.
Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> J L Newcomb Jr	502-348-3961
SIGNATURE	DATE SIGNED
J L Newcomb Jr	12/12/08

OUTFALL NO:

Pollutant and CAS Number (if available)	Maximum Values (include units)		Average Values (include units)		Number of Storm-Events Sampled	Sources of Pollutants
	Grab Sample Taken During 1 st 20 Minutes	Flow-weighted Composite	Grab Sample Taken During 1 st 20 Minutes	Flow-weighted Composite		
Oil and Grease	< 2 mg/L	N/A	< 2 mg/L	Not sampled	1	
Biological Oxygen Demand BOD ₅	Not sampled					
Chemical Oxygen Demand (COD)	Not sampled					
Total Suspended Solids (TSS)	10 mg/L	Not sampled	10 mg/L	Not sampled	1	
Total Kjeldahl Nitrogen	Not sampled					
Nitrate plus Nitrite Nitrogen	Not sampled					
Total Phosphorus	Not sampled					
pH	Minimum 8.3	Maximum 8.3	Minimum	Maximum		

[illegible]

Part C - List each pollutant shown in Tables F-2, F-3, and F-4 that you know or have reason to believe is present. See the instructions for additional details and requirements. Complete one table for each outfall.

[illegible]

Part D - Provide data for the storm event(s) which resulted in the maximum values for the flow-weighted composite sample.

1. Date of Storm Event	2. Duration of Storm Event (in minutes)	3. Total rainfall during storm event (in inches)	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event (gal/min or specify units)	6. Total flow from rain event (gallons or specify units)
7/31/08 valve controlled release following storm event	45 min - Duration the valve was open	2475 gal - Quantity held in diked area	48 hours since previous release from diked area	55 gpm release rate	2475 gallons contained in diked area

7. Provide a description of the method of flow measurement or estimate.

Flow is estimated from the valve-controlled release by applying 55 gallons per minute as the average discharge rate. The opening and closing times of the valve are noted and the total flow is calculated by applying 55 gallons for each minute of recorded flow.

Permittee
NEWCOMB OIL CO
Reported by
McCoy & McCoy Laboratories, Inc.
PO Box 907 825 Industrial Road
Madisonville, KY 42431

Facility
NEWCOMB OIL CO
Location
BARSTOWN KY 42728

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)


Permit Number
KY0071765
Discharge
001 1

MONITORING PERIOD					
From			To		
Year	Month	Day	Year	Month	Day
2008	07	01	2008	07	31

MINOR
(SUBR CO)
F FINAL
STORMWATER RUNOFF
EFFLUENT
ADAIR

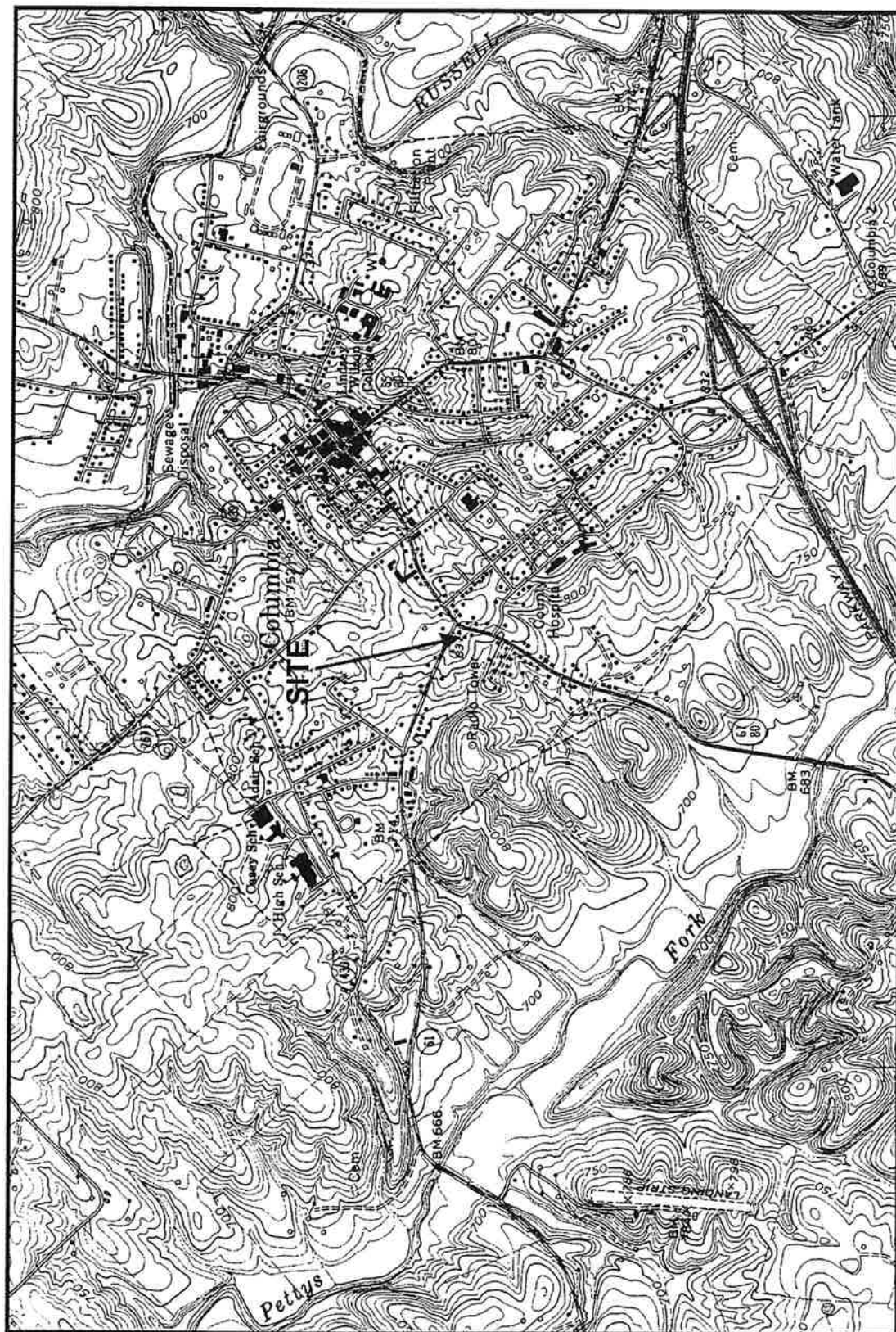
*** NO DISCHARGE ***

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH		*****	*****	****	8.3	*****	8.3	(12)	1/31	GRAB
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	****	6 MINIMUM	*****	9 MAXIMUM	SU	ONCE/ DISCHG	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	10	10	(19)	1/31	GRAB
SOLIDS, TOTAL SUSPENDED	PERMIT REQUIREMENT	*****	*****	****	*****	30	60	MG/L	ONCE/ DISCHG	GRAB
00530 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	30DA AVG	DAILY MX	(19)	1/31	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	<2	<2			
OIL AND GREASE	PERMIT REQUIREMENT	*****	*****	****	*****	10	15	MG/L	ONCE/ DISCHG	GRAB
03582 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	30DA AVG	DAILY MX	(28)	1/31	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	<5.000	<5.000			
TOLUENE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 30DA AVG	REPORT DAILY MX			
34010 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 30DA AVG	REPORT DAILY MX	UG/L	ONCE/ DISCHG	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	<5.000	<5.000	(28)	1/31	GRAB
BENZENE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 30DA AVG	REPORT DAILY MX	UG/L	ONCE/ DISCHG	GRAB
34030 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 30DA AVG	REPORT DAILY MX	UG/L	ONCE/ DISCHG	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	(03)	*****	*****	*****	****		
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	*****	REPORT DAILY MX	MGD	*****	*****	*****	****	ONCE/ DISCHG	INSTAN
50050 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	****		
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	****		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER DEVIN GREENWELL	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE KRS 5.065 AND KRS 224.994. (PENALTY UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$25,000 PER DAY OF VIOLATION OR IMPRISONMENT FOR UP TO ONE YEAR OR BOTH.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE (800) 928-6648	DATE 68 10 28 Year Month Day
TYPED OR PRINTED				

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Samples to be taken a minimum of once per month during discharge. If no discharge occurs during the reporting period, then record "No Discharge" on the Discharge Monitoring Report (DMR).



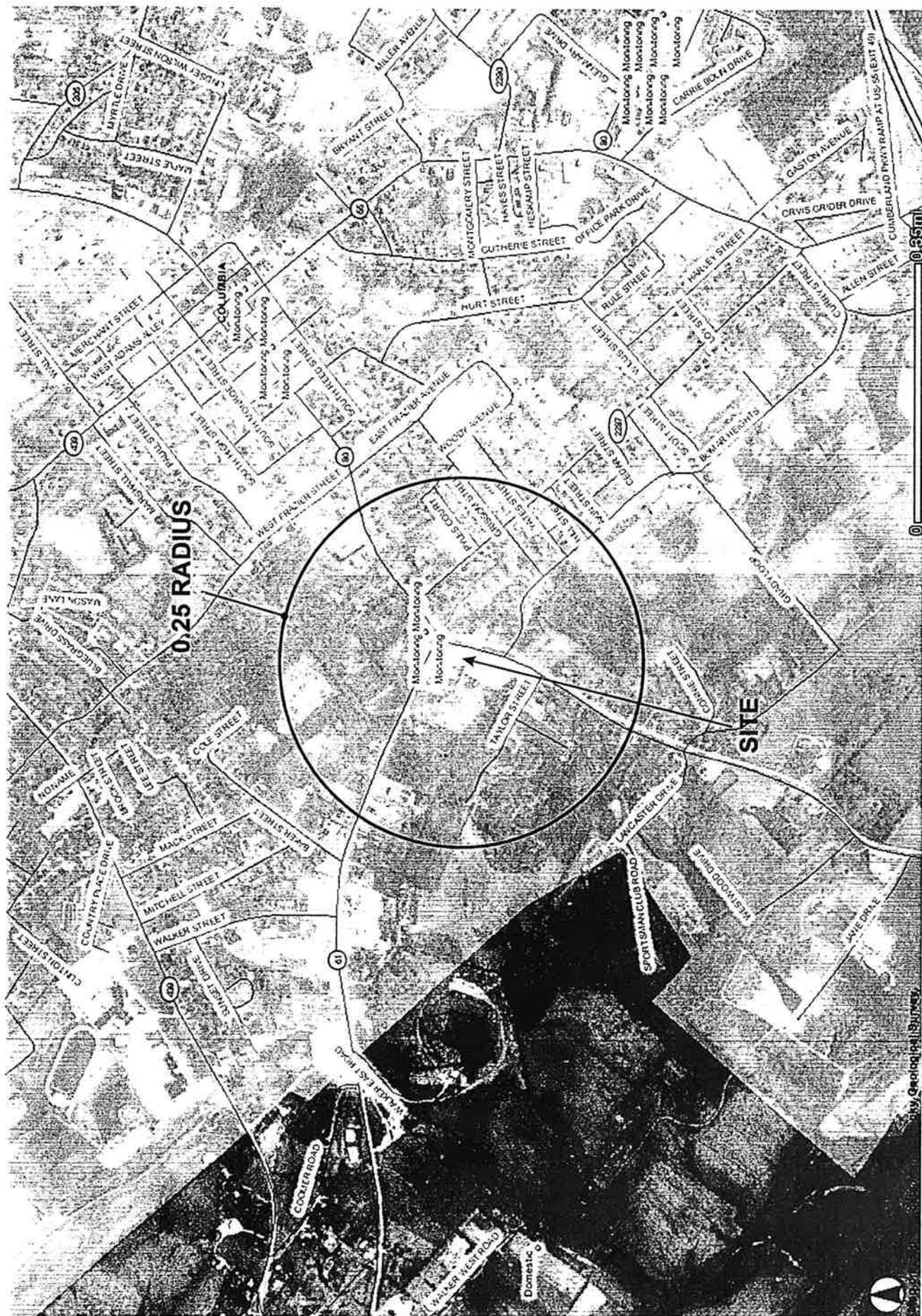
EXCERPT FROM USGS, 7-1/2 MINUTE TOPOGRAPHIC QUADRANGLE MAP (COLUMBIA):

NEWCOMB OIL - COLUMBIA PLANT

706 BURKESVILLE ST.

700 DOINKSVILLE ST.
COLUMBIA, KY 42728

COLUMBIA, KT 42720
KPDES PERMIT NO. KY0071765



SEE ATTACHED LIST FOR LIST OF WELLS

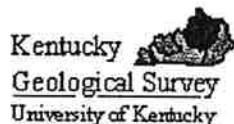
WELL SEARCH MAP (FROM KENTUCKY GEOLOGICAL SURVEY):

NEWCOMB OIL - COLUMBIA PLANT

706 BURKESVILLE ST.

COLUMBIA, KY 42728

KPDES PERMIT NO. KY0071765



Water Well Records Search Results

Kentucky Groundwater Data Repository

Search Date: 4/20/2004

Search Criteria:

Latitude = 37° 05' 55"

Longitude = - 85° 18' 52"

Search Radius = .25 miles

Current Page: 1

Total Pages: 1

Total Number of Records: 7

Max Records Per Page: 25

Click the button below to download ALL the retrieved records into a comma-delimited '.txt' file:

DOWNLOAD HEADER REPORT

NOTE: You will be prompted to select a desired datum & projection for the data.
By default, NAD-27 decimal degree coordinates are selected.

Water Quality Analyses Download

To download ALL the available water-quality analyses for the water wells found in your search into a semicolon-delimited text file, click the button below. A yellow check-box in the results table indicates which wells, if any, have water-quality analyses.
(wells have analyses available)

Due to the large number of records returned,
the file may take several minutes to download

DOWNLOAD WATER QUALITY ANALYSES



[HELP: About Water Quality Analyses Reports](#)
[Water Quality Standards \(pdf file\)](#)

****Note that these data represent only information contained in the Kentucky Ground-Water Data Repository, and may not be representative of all hydrologic sites (i.e., wells, springs) in the search area. Water wells did not have to be registered with the State prior to 1985.**

****If this data search revealed any PUBLIC water supply wells, or if you have identified public water supply wells on your site that are not indicated by this search, then you must contact the Kentucky Division of Water (DOW), Groundwater Branch, to determine whether your site is located within a wellhead protection area. Until further notice, you do not have to contact DOW concerning wellhead protection areas if neither of the above cases apply. The contact persons at DOW are Ms. Beverly Oliver or Mr. Ernie Ellison at (502) 564-3410, and the web address is:**

<http://water.nr.state.ky.us/dow/permitp1.htm>

[VIEW SPRING RECORDS IN THE SAME AREA](#)

Sort Results By: AKGWA Number



Records Per Page: 25

[RESUBMIT](#)

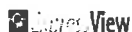
[<<<<<<GO BACK TO THE SEARCH PAGE | EMAIL FEEDBACK](#)

AKGWA # KGS ID PUBLIC (if shown)	View Well On A Map (via ArcIMS)	Well Report (lithologic and casing data)	Quality Analyses?	Quadrangle	County	Construction Date	Primary Use	Depth to Bedrock	Total Depth
AKGWA #: 80045638 KGS ID: 69640	MAP VIEW	WELL REPORT	--	Columbia	Adair	6/7/2002	WATER LEVEL MON	1 ft	15 ft
AKGWA #: 80045637 KGS ID: 69641	MAP VIEW	WELL REPORT	--	Columbia	Adair	6/7/2002	WATER LEVEL MON	1 ft	15 ft
AKGWA #: 80045636 KGS ID: 69642	MAP VIEW	WELL REPORT	--	Columbia	Adair	6/7/2002	WATER LEVEL MON	3 ft	15 ft
AKGWA #: 80045635 KGS ID: 69643	MAP VIEW	WELL REPORT	--	Columbia	Adair	6/7/2002	WATER LEVEL MON	1 ft	15 ft
AKGWA #: 80013357 KGS ID: 23775	MAP VIEW	WELL REPORT	--	Columbia	Adair	3/7/1994	MONITORING	-	30 ft
AKGWA #: 80013355 KGS ID: 23773	MAP VIEW	WELL REPORT	--	Columbia	Adair	3/7/1994	MONITORING	-	29 ft

AKGWA #: 80013354 KGS ID: 23774	MAP VIEW	WELL REPORT	--	Columbia	Adair	3/7/1994	MONITORING	-	30 ft
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<<<<<<GO BACK TO THE SEARCH PAGE | EMAIL FEEDBACK

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information about DjVu.

ExpressView
Browser Plugin (MrSID)

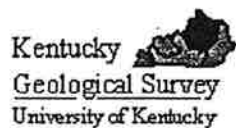
Adobe Reader
(pdf docs)

Kentucky Geological Survey
228 Mining and Mineral Resources Building
University of Kentucky
Lexington, KY 40506-0107
Phone: (859) 257-5500

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Last modified 04/20/2004 12:13:43*



Spring Records Search Results

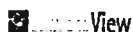
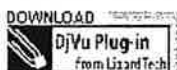
Kentucky Groundwater Data Repository

NO RECORDS FOUND!

SEARCH CRITERIA:
Latitude = $37^{\circ} 05' 55''$
Longitude = $-85^{\circ} 18' 52''$
Search Radius = .25 miles

[CLICK TO TRY YOUR SEARCH AGAIN](#)

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228 Mining and Mineral Resources Building
University of Kentucky
Lexington, KY 40506-0107
Phone: (859) 257-5500

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